

EXHIBIT A



Bank Depositor Agreement (Business Deposit Accounts)

Please type or print clearly using black ink. Ensure the Agreement is fully completed and signed in all required sections.

CLIENT INFORMATION

Client Name ("Client") (Title on Account) SVB Financial Group

Business Address (Physical)

3003 Tasman Drive, Santa Clara, CA 95054

Mailing Address (if different)

Phone _____ Cell _____ Fax _____

State of Incorporation/Registration (Country if Non-US) DE

TAX ID INFORMATION & CERTIFICATION

Please provide your TIN and complete the Tax Certification below. Contact your Tax Advisor for questions regarding this certification.

Do not complete the following Certification if you are a foreign person. You must provide Bank with the appropriate IRS Form W-8 (i.e., W-8BEN, W-8BEN-E, W-8ECI, W-8EXP, or W-8IMY.)

Request for Taxpayer Identification Number and Certification

Name (as shown on your income tax return): SVB Financial Group

Business Name/disregarded entity name, if different from above: _____

Check the appropriate box:

- | | | |
|--|---|--|
| <input type="checkbox"/> Individual/Sole Proprietor | <input type="checkbox"/> S Corporation | Exemptions (see IRS Form W-9 instructions): |
| <input type="checkbox"/> Partnership | <input checked="" type="checkbox"/> C Corporation | Exempt Payee Code (if any) _____ |
| <input type="checkbox"/> Single-Member LLC | <input type="checkbox"/> Trust/Estate | Exemption From FATCA Reporting Code (if any) _____ |
| <input type="checkbox"/> Limited Liability Company. Enter the tax classification (C=C Corporation, S=S Corporation, P=Partnership) _____
<small>Note: For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.</small> | | |
| <input type="checkbox"/> Other ► _____ | | |

Taxpayer Identification Number: [REDACTED]

Under penalties of perjury, I certify that:

- (1) The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- (2) I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- (3) I am a U.S. citizen or other U.S. person (defined in the instructions), and
- (4) The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification Instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. See the instructions on page 3 of IRS Form W-9. The instructions are available upon request.



Bank Depositor Agreement (Business Deposit Accounts)

Client Name ("Client") (Title on Account) SVB Financial Group

AGREEMENT

By signing below, Client agrees to the terms and conditions, and acknowledges receipt, of Silicon Valley Bank's ("Bank") Deposit Agreement and Disclosure Statement (the "Deposit Agreement") and fee schedule(s). Client also agrees to the terms and conditions governing Bank products and services as used now or in the future by Client, as set forth in the agreements covering those products and services ("Related Agreements"). These Related Agreements may include terms and conditions agreed to electronically by Client as part of its account application or onboarding process including but not limited to terms and conditions for Bill Pay, Debit Cards, Automated Clearinghouse (ACH), wires, online banking, or remote deposit capture (RDC). Client further agrees that the Deposit Agreement, Fee Schedules and Related Agreements may be amended or supplemented by Bank from time to time and are incorporated herein by this reference; and that by entering into this Bank Depositor Agreement and continuing to use the Bank's products and services, Client agrees to any and all such amendments or supplements, which may be provided electronically or through any other means described in the Deposit Agreement. Client appoints each person named as a contracting officer below as a "Contracting Officer." Client further appoints each person named as an authorized signer on the Authorized Signatures page of this Bank Depositor Agreement, and each person from time to time named as an authorized signer by a Contracting Officer, as an "Authorized Signer." Each Contracting Officer and each Authorized Signer is authorized, acting alone, for and on behalf of Client and without regard to any multiple signature or other requirements that might otherwise be implemented by Client, to: (a) establish, pledge and/or otherwise give instructions regarding one or more deposit accounts and other products and services with and from the Bank or its affiliates, (b) negotiate, agree and enter into (by signing or otherwise) the Deposit Agreement, the Bank's Fee Schedule(s), and/or other Related Agreements, and (c) withdraw funds, draw, sign, deposit and endorse checks, and otherwise to transact on and deal with any account in all ways. Each Contracting Officer is further authorized, acting alone, for and on behalf of Client and without regard to any multiple signature or other requirements that might otherwise be implemented by Client, to: (d) terminate, replace, supersede or create new Authorized Signers. Client agrees that Bank may rely on these records until such time as Bank is given notice acceptable to Bank of an addition, substitution, removal or other change of any Contracting Officer or Authorized Signer; provided, however, that Bank may at its discretion hold, freeze or interplead account funds at any time Bank receives inconsistent instructions from Contracting Officers, owners, Authorized Signers or other authorized users, or others claiming an interest in the account. Client agrees that Bank is not responsible for any Client-internal signature restrictions (for example, "two signatures" required) or any other Client restrictions on account usage by Authorized Signers. Nothing in this Bank Depositor Agreement shall be deemed to limit any rights Bank may have under the Deposit Agreement or any Related Agreement as regards Client or Client's account(s).

CONTRACTING OFFICERS (Line through unused signature blocks)

By signing below, I agree to this Bank Depositor Agreement (including the Deposit Agreement, the Fee Schedule(s) and the Related Agreements), as set forth above, on behalf of Client. I personally and on behalf of Client represent and warrant that:

(1) I hold the title described below, (2) I and each other person shown below as a Contracting Officer or Authorized Signer is duly authorized by resolution, agreement or other legally sufficient action of the governing body of Client, to enter into this Bank Depositor Agreement and Related Agreements and to act as a Contracting Officer or Authorized Signer, as indicated, on behalf of Client for all purposes as described herein, and (3) each person named as an Authorized Signer on the Authorized Signatures page of this Bank Depositor Agreement holds the position indicated, is duly authorized to act as an Authorized Signer on behalf of the Client, and the signatures appearing opposite their names are their authentic official signatures.

If a copy of this Bank Depositor Agreement is provided to the Bank in lieu of the original, Client hereby certifies that it is a true, accurate and complete copy of the original.

NOTE: The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

Signature: _____

Zain Haider
Zain Haider

Print Name: Zain Haider

Title: Global Treasurer

Email: zhaid@svb.com

Phone #: (302) 393-9749 Cell #: _____

Date: 2/27/2023

Signature: _____

Print Name: _____

Title: _____

Email: _____

Phone #: _____ Cell #: _____

Date: _____

Signature: _____

Print Name: _____

Title: _____

Email: _____

Phone #: _____ Cell #: _____

Date: _____

Signature: _____

Print Name: _____

Title: _____

Email: _____

Phone #: _____ Cell #: _____

Date: _____

☐ Check this box if you are a nonprofit organization operated for religious, charitable, education or other similar purposes.

Account Numbers (Use this section if the only Authorized Signers are the Contracting Officers above)



Bank Depositor Agreement (Business Deposit Accounts)

Client Name ("Client") (Title on Account) SVB Financial Group

AUTHORIZED SIGNATURES

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☐ New ☒ Supersedes Existing Authorized Signatures page


Account Numbers

5270

2756

0822

AUTHORIZED SIGNERS

Signature  Name/Title Zain Haider , Global Treasurer
Phone #(s) (302) 393-9749 Email zhaider@svb.com

Signature _____ Name/Title _____
Phone #(s) _____ Email _____

Signature _____ Name/Title _____
Phone #(s) _____ Email _____

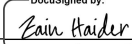
Signature _____ Name/Title _____
Phone #(s) _____ Email _____

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I hereby confirm that the signatures detailed above are Authorized Signers in accordance with, and ratify agreement to (including without limitation all representations and warranties contained therein), the **Bank Depositor Agreement** between Bank and Client. (Must be a Contracting Officer on the existing Bank Depositor Agreement).

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 2/27/2023
Contracting Officer Signature Date
Zain Haider Global Treasurer
Print Name Title



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| <input type="checkbox"/> Single-Member LLC | <input type="checkbox"/> Trust/Estate | Exemption From FATCA Reporting Code (if any) _____ |
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NOTE: The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

Signature: _____

Print Name: Zain Haider

Title: Global Treasurer

Email: zhaid@svb.com

Phone #: (302) 393-9749 Cell #: _____

Date: 2/27/2023

Signature: _____

Print Name: _____

Title: _____

Email: _____

Phone #: _____

Cell #: _____

Date: _____

Signature: _____

Print Name: _____

Title: _____

Email: _____

Phone #: _____

Cell #: _____

Date: _____

Signature: _____

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Title: _____

Email: _____

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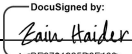
☐ New ☒ **Supersedes Existing Authorized Signatures page**

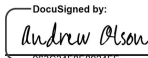
Account Numbers


6176

* Signers on this pages are for this account only

AUTHORIZED SIGNERS

Signature  Name/Title Zain Haider, Global Treasurer
Phone #(s) (302) 393-9749 Email zhaider@svb.com

Signature  Name/Title Andrew Olson, CFO SVB Capital
Phone #(s) (650) 926-0418 Email anolson@svb.com

Signature  Name/Title Zankhna Vasha, BU CFO, Equity SVB Capital
Phone #(s) (650) 926-0456 Email zvasha@svb.com

Signature _____ Name/Title _____
Phone #(s) _____ Email _____

Signature _____ Name/Title _____
Phone #(s) _____ Email _____

Signature _____ Name/Title _____
Phone #(s) _____ Email _____

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Signature  Date 2/27/2023
Contracting Officer Signature _____
Zain Haider _____
Print Name _____ Global Treasurer
Title _____